FEE TRANSMITTAL FOR FY 2005

Patent fees are subject to annual revision.

ш	App	licant	claims	small	entity	status.	See 37	CF	RI	.27	7
								_			-

OTAL	AMOUNT OF PAYMENT	(\$)450.00

Complete if Known					
Application Number	09/688,216				
Filing Date	10-16-2000				
First Named Inventor	Knud Erik BÆKGAARD et al.				
Examiner Name	Laura A. Grier				
Art Unit	2644				
Attorney Docket No.	742114-5				

METHOD OF PAYMENT (check all that apply)			FEE CALCULATION (continued)							
Check Credit Card Money Other None Order			3. ADDITIONAL FEES							
Deposit Account:			Large Entity S		Small Entity					
Deposit Account 19-2380(742114-5)			Fee (\$)	Fee Code	Fee (S)	- -	Foo Desc	ription		
Number		Code 1051	130	2051	65	Surcharg	e late filing fee	or eath		
		1052	50	2052	25		e - tate provision	al filing fee or cover		
Deposit		1053	130	1053	130	sheet Non-Eng	tish specification	•	ļ	
Account Nixon	Peabody LLP	1812	2.520	1812	2,520	-		parte reexamination	<u> </u>	
·	ithorized to: (check all that apply)	1804	920*	1804	920*		ng publication of	SIR prior to Examiner		
Charge fee(s) indicates	m=1.	1805	1,840*	1805	1.840*		ng publication of	SIR after Examiner		
Charge any additional	fce(s)	1251	120	2251	60	action Extension	n for reply within	first month		
	t below, except for the filing fee	1252	450	2252	225	Extension	n for reply within	second month	450.00	
to the above-identified depos	it account.	1253	1,020	2253	510		n for reply within		450.00	
FE	E CALCULATION	1254	1,590	2254	795		n for reply within			
1. BASIC FILING FEE		1255	2,160	2255	1.080		n for reply within			
Large Entity Small E	ntity	1401	500	2401	250	Notice of				
Fee Fee Fee Code (\$) Code	Fee Fee Description (\$) Fee Paid	1402	500	2402	250		rief in support of	fan appeal		
Cour (3) Code	(3) rec rain	1403	1.000	2403	500		for oral hearing	•		
1001 300 2001	150 Utility filing fee	1451	1.510	1451	1.510	-	•	ic use proceeding		
1002 200 2002	100 Design filing fee	1452	500	2452	250		o revive unavoi			
1003 200 2003	100 Plant filing fee	1453	1,500	2453	750	Petition to	o revive – uninte	ntional		
1004 300 2004	150 Reissue filing fee	1501	1,400	2501	700					
1005 200 2005	100 Provisional filing fee	1502	800	2502	400	Design is:	suc fee			
		1503	1,100	2503	550	Plant issu	ic fee			
	SUBTOTAL (1) (S) 0	1460	130	1460	130	Petitions (to the Commissio	ner		
	<u> </u>	1807	50	1807	50	Processin	g fee under 37 C	FR 1.17(a)		
2. EXTRA CLAIM F	EES FOR UTILITY AND REISSUE	1806	180	1806	180			Disclosure Stmt		
	Fee from	8021	40	8021	40			gament per property		
Total Claims 18 -22** X Fee Pald			790	2809	395		mber of propertie abmission after fi 1-129(a))			
Independent 7 -8*	*- X = 0	1810	790	2810	395	For each additional invention to be examined (37 CFR 1.129(b))				
Multiple Dependent	x 0	1801	790	2801	395	_	or Continued Exa	mination (RCE)		
	Fee Fee Description	1802	900	1802	900	Request fo	or expedited exam	nination of a design		
1	(5)	Other	fee (specif	ÿ)				[
	25 Claims in excess of 20									
	00 Independent claims in excess of 3 80 Multiple dependent claim, if not paid	*Reduc	ed by Ba	sic Filing	Fee Paid	ı	SUBTOTAL	(3) (\$)450.00		
	Multiple dependent claim, if not paid ** Reissue independent claims over									
1205 50 2205	original patent	l berr	hu certifi			ndence is bei		ISSION [37 CFR 1.8(a)]	г	
1203 30 2203 .	25 ** Reissue claims in excess of 20 and over original patent]						on the date shown below		
	SUBTOTAL (2) (S) 0		p	ensinge a	s first clas	s mail in an	envelope address	ed to: Mail Stop	with shifteners	
**or number previously paid, if greater, For Reissues, see above			Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450							
			28) ti	ransmitte Trademor	a by facsi k Office a	imile on the (it (703) <u>872-</u>	date shown belov 9306	to the United States Par	ent and	
	May	31, 2005				talk	lein m. mc	namus		
		Date Signature								
		 						Kathleen M. McManus ped or printed name		
SUBMITTED BY										
	David S. Safran	Registr	ation No	. 2	Complete (if applicable) 27,9987					
Name (Print/Type)	1 4/1/	(Attorn	ey/Agent	2			Telephone			
Signature	1/20						Date	May 31, 2005		

SEND TO: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

MAY 3 1 2005

PETITION FOR EXTENSE	ON OF TIME UNI	DER 37 CFR 1.136(a)		Docket Number (Optional) 742114-5				
CERTIFICATE OF MA		In re Application of Knud Erik BÆKGAARD et al.						
(37 CFR 1.8(a	a)]	Application Number (Application Number 09/688,216 Filed 10/16					
I hereby certify that this correspondence with the United States sufficient postage for first class	Postal Service with	For ELECTRONIC STETHOSCOPE						
addressed to Mail Stop Amenda for Patents. P.O. Box 1450, Ales 22313-1450, or being facsimile t USPTO at 703-872-9306, on Ma Signature Tables M. Name: Kathleen M. McManus	ient. Commissioner undria. Virginia transmitted to the	Group Art Unit 2644	-	Examiner L.A	Grier			
This is a request under reply in the above iden	the provisions tified application	of 37 CFR 1.136(a) to exon.	tend the period	for filing a				
The requested extension (check time period des		ate entity fee are as follo	ws					
One mon	th (37 CFR 1.1"	7(a)(1)) - (\$60/\$120)			\$			
🗷 Two mon	ths (37 CFR 1.	17(a)(2)) - (\$225/\$450)			\$ <u>450.00</u>			
☐ Three mo	onths (37 CFR 1	.17(a)(3)) - (\$510/\$1020))		\$			
☐ Four mon	ths (37 CFR 1.	17(a)(4)) - (\$795/\$1590)	•		\$	l		
		17(a)(5)) - (\$1080/\$2160)		\$			
Applicant claims s	•		. 06/02/	/2005 DADDAUA+	00000052 192380			
☐ A check to cover the						O9688216		
Payment by credit card. Form PTO-2038 is attached. 01 FC:1252 450.00 DA								
The Commissioner has already been authorized to charge fees in this application to a Deposit Account.								
The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 19-2380(742114-5) I have enclosed a duplicate copy of this sheet.								
l am the 🔲 applicant/inventor								
☐ assignee of States	assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).							
🗷 attorney o	r agent of recor	d.						
attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a)								
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.								
May 31, 2005 Date Signature								
		-	Typed	David S. Safran or printed name ration No. 27,9	2			
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.								
☐ Total of	forms are submi	tterd				7		

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